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## BIB DATA SHEET

CONFIRMATION NO. 4956

<b>SERIAL NUMBER</b> 10/700,018	<b>FILING or 371(c) DATE</b> 11/03/2003 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1637	<b>ATTORNEY DOCKET NO.</b> 25006.0003U4		
<b>APPLICANTS</b> Paul M. Lizardi, Hamden, CT; <b>** CONTINUING DATA *****</b> This application is a CON of 09/911,226 07/23/2001 PAT 6,642,034 which is a CON of 09/397,915 09/17/1999 PAT 6,280,949 which is a CON of 08/946,732 10/08/1997 PAT 6,124,120 <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b> 12/22/2003						
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /JOYCE TUNG/ Acknowledged Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> CT	<b>SHEETS DRAWINGS</b> 4	<b>TOTAL CLAIMS</b> 18	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> NEEDLE & ROSENBERG, P.C. SUITE 1000 999 PEACHTREE STREET ATLANTA, GA 30309-3915 UNITED STATES						
<b>TITLE</b> Multiple displacement amplification						
<b>FILING FEE RECEIVED</b> 435	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		